



**DEPARTMENT OF THE TREASURY**  
**FINANCIAL MANAGEMENT SERVICE**  
HYATTSVILLE, MD 20782

DATE: April 27, 2001

TO: IPAC AGENCY ADMINISTRATORS

FROM: MICHAEL NORMAN  
IPAC PROJECT MANAGER

SUBJECT: Intra-governmental Payment and Collection (IPAC) User Registration

Congratulations on being selected to serve as an IPAC Agency Administrator (IAA). As an IAA, you will be the administrative contact for your group of users. You are responsible for the following:

- ① Identifying each person that requires access to IPAC for the ALC(s) for which you are responsible.
- ② Assigning user roles/functions for each user for each application.
- ③ Providing all completed IPAC User Registration Forms to FMS for processing by July 2, 2001.
- ④ Adding and deleting users, and updating user profiles on an as needed basis after system implementation.
- ⑤ Administering the password process for agency users. Passwords you assign will be one-time use passwords that must be changed the first time a user logs on.
- ⑥ Conducting a quarterly access audit for your organization. The purpose of this audit is to validate and correct access and authority for all users. Either the IAA or the Alternate must be designated to perform this function.
- ⑦ Ensuring that your IPAC users follow system procedures.

You are also responsible for protecting the IPAC system information from unauthorized use, modification, destruction, or disclosure. Therefore, FMS requires each IAA and Alternate read the Due Diligence Guidelines (Attachment 1) and sign the IPAC Agency Administrator Responsibility Agreement (Attachment 2). Signed forms should be returned to FMS using the information provided at the bottom of the form. After FMS receives your signed Responsibility Agreement, the IAA will be permitted to submit IPAC User Request Forms to FMS for processing and will be issued a Logon ID and Password. **IPAC User Request Forms will not be accepted from IAA's that have not submitted the signed Responsibility Agreement.**

Your Agency may choose to have each IPAC user sign a responsibility agreement for internal security purposes. Attachment 3 is an IPAC End User Responsibility Information Form that can be used if your Agency does not already have a standard in-house due diligence form. You should retain all IPAC user responsibility agreements.

Please distribute the IPAC User Request Form (Attachment 4) to all staff members that will require access to the IPAC system. Instruct each user to return the form to you once their supervisor has reviewed and signed the form. Collect the completed form from each of your users. Ensure that the form has a supervisor's signature, and that proper ALCs and / or Payroll Offices are listed. As FMS is unfamiliar with the names of the people in your organization, we request your assistance in ensuring that the forms are completed neatly and legibly. Forms that are not clear or legible may be returned to you for resubmission, as the accuracy of the data entered into the system is critical to your agency's successful use of the system. Complete the 'For IAA Use Only' box on the bottom of the form and fax it to the IPAC Enrollment Department at (202) 874-6170 by July 2, 2001.

FMS will process the IPAC User Request Forms for the initial IPAC rollout. The user's Logon ID and Password will be sent directly to the user. Creation of Logon IDs needed after the September 4, 2001 implementation will be the IAA's responsibility.

**Please gather completed IPAC User Request Forms from your users and provide them to FMS by July 2, 2001.** FMS cannot guarantee that forms received after July 2<sup>nd</sup> will be processed in time for access to be granted by September 4<sup>th</sup>. FMS requires that each IAA retain a copy of the signed IPAC User Request Form and Responsibility Agreement on file for audit purposes.

Thank you for your continued support and cooperation in this effort. If you have any questions about the information in this letter, please contact Dara Seaman on (202) 874-1618, or send an email to [IPAC.Help@fms.treas.gov](mailto:IPAC.Help@fms.treas.gov).

Attachments

# IPAC Agency Administrator To Do List

(Place a check in each box after the task has been completed)

- ☐ Read Due Diligence Guidelines (Attachment 1)
- ☐ Sign the IPAC Agency Administrator Responsibility Agreement (Attachment 2)
- ☐ Fax the signed IPAC Agency Administrator Responsibility Agreement to the IPAC Enrollment Department at (202) 874-6170
- ☐ Distribute the IPAC End User Responsibility Information (Attachment 3) and IPAC User Request Form (Attachment 4) to all potential IPAC Users
- ☐ Collect all completed End User Responsibility Information and IPAC User Request Forms from all potential IPAC Users
- ☐ Review each of the completed End User Responsibility Information and IPAC User Request Forms for legibility, completeness and accuracy. For the IPAC User Request Form, ensure that:
  - The employee's supervisor has signed the IPAC User Request Form
  - Agency Location Codes are provided for all requests for IPAC and TRACS, and that Payroll Office Numbers are provided for RITS requests.
- ☐ Complete the bottom portion of the IPAC User Request Form upon your review
- ☐ **Fax the signed IPAC User Request Form to the IPAC Enrollment Department at (202) 874-6170 – by July 2, 2001**
- ☐ Retain the signed End User Responsibility Information Form for your records



**Intra-governmental Payment and Collection System**

**Due Diligence Guidelines**

It is very important to verify the identity of the Federal Program Agency<sup>1</sup>, their IPAC Agency Administrator<sup>2</sup>, and End User<sup>3</sup>. The general rule is the more sensitive the information, the more exhaustive the verification process.

1. The Federal Program Agency will provide a written list, with the names of at least two support contacts (IPAC Agency Administrators) including contact information to FMS. One contact name shall be designated as Primary and the other(s) as Alternate(s). The individuals identified as IPAC Agency Administrators must have the level of authority at the Federal Program Agency to determine whether an End User should be given access to the requested IPAC application(s).
  2. After FMS has received a signed IPAC Agency Administrator Responsibility Agreement from the IPAC Agency Administrator(s), FMS will accept completed IPAC User Request Forms from the IAA's users, and issue the IAA(s) their Logon ID(s) and Password(s) that will enable them to enroll End Users to the IPAC system.
  3. An IPAC User Request Form containing the name and other required identification of the individual End User requesting a Logon ID and application access will be completed by either the End User or the IPAC Agency Administrator. The IPAC Agency Administrator must verify that the End User is who they say they are and can be authorized to access the application(s), which have been requested. At a minimum, this will require the signature of the End User's management on the IPAC User Request Form. Other existing procedures may also be used. *Note, if the IPAC Agency Administrator is also the End User's management, the alternate IPAC Agency Administrator should verify the request.*
  4. After the End User is verified and the request is authenticated, the IPAC Agency Administrator can then process the request.
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<sup>1</sup> **Federal Program Agency** – business entity requiring access to the IPAC system.

<sup>2</sup> **IPAC Agency Administrators** – term for the individual(s) identified formally by the Federal Program Agency as trusted to authorize requests for other individual(s) at their Agency to access the IPAC system on their behalf.

<sup>3</sup> **End User** – an individual person employed by a Federal Program Agency who has a business need for access to the IPAC system.



**Intra-governmental Payment and Collection System**

**IPAC Agency Administrator  
Responsibility Agreement**

This form is in compliance with the Privacy Act of 1974 (Section 552a, 5 U.S.C.), Section 301, 5 U.S.C., Section 3105, 44 U.S.C., 18 U.S.C. 3056, and the Treasury Departmental Offices Directive DO 216. The information you provide on this form will be used principally to aid in the completion of your access request to FMS systems. All or part of this information may be furnished to Federal, State, local and public agencies in the event a violation of law is disclosed.

Completion of this form is voluntary; however, failure to complete the form requested will result in no consideration for access to FMS systems. Although no penalties are authorized if you do not provide the requested information, failure to supply information will result in your not receiving access to FMS systems.

Responsibilities:

I am aware that the *Financial Management Service (FMS)* policy is to treat all information as an asset, whether it is computer programs, software, data or other information collected, stored, and generated in the conduct of its business. To the best of my ability, I will protect information from unauthorized use, modification, destruction, or disclosure, whether accidental or intentional.

I am aware of the policies and requirements of FMS and agree to abide by them.

I will NOT attempt to circumvent any of the security mechanisms within the IPAC system.

I will safeguard Logon IDs and Passwords entrusted in my control.

I will ensure that proper authorizations on request forms are checked.

I will ensure that all fields on the request forms are complete and correct.

I will issue Logon IDs, Passwords and Access on a need-to-know basis.

I will ensure proper record keeping of all information processed.

I will comply with all security-related policies, standards, procedures and practices.

I will notify FMS' GOALS Marketing Staff at 202-874-8270 of any known or suspected violation of information security policy, procedures, or threat to IPAC resources.

**IPAC Agency Administrator ACKNOWLEDGMENT**

I have read and understand the IPAC Agency Administrator Responsibility Agreement and agree to abide by it.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Agency / Bureau: \_\_\_\_\_

Fax this SIGNED acknowledgment to the IPAC Enrollment Department at (202) 874-6170.



***Intra-governmental Payment and Collection System***

**IPAC END USER  
RESPONSIBILITY INFORMATION**

The ***Financial Management Service (FMS)*** is granting me access to the IPAC system. I will use this access in a responsible way and only to accomplish legitimate ***IPAC*** business. I will not disclose my password to other people nor will I knowingly or carelessly make it possible for other people to access the IPAC system using my Logon ID and Password. I am responsible for all actions that are taken under my Logon ID. I further understand that my assigned Logon ID and password serve as my electronic signature for all activity while active in the IPAC system.

I am aware of my responsibility for complying with the ***IPAC*** policies and safeguards.

I understand that computer programs, software, listings and the information in the IPAC system to which I will have access are valuable assets of ***FMS*** and are considered proprietary. I am aware that this information may be protected by copyright and other laws, and is the property of ***FMS***.

If I no longer require this access or a change in access requirements occurs, I will promptly notify my manager or ***IPAC Agency Administrator***.

I understand that unauthorized access or disclosure of ***IPAC system*** information will be subject to management review and action.

USER NAME: \_\_\_\_\_

USER SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**RETURN THIS FORM TO YOUR *IPAC Agency Administrator***



Intra-governmental Payment and Collection System

Attachment 4

## IPAC User Request Form

**\*\*Please TYPE or legibly PRINT your information\*\***

### Section I – IPAC User Information (all fields are required except Mail Stop)

Name (First, Middle Initial<sup>1</sup>, Last) \_\_\_\_\_  
Master ALC<sup>2</sup> \_\_\_\_\_  
Internet Email Address \_\_\_\_\_  
Complete Work Phone \_\_\_\_\_  
  
Agency Name \_\_\_\_\_  
Street \_\_\_\_\_  
Mail Stop (optional) \_\_\_\_\_  
City, State Zip Code \_\_\_\_\_  
Country \_\_\_\_\_

### Section II – Access requested

For IPAC and TRACS, provide the ALC(s) for which access is required; provide the Payroll Office number for access to RITS. For each ALC or Payroll Office, circle the user role(s) for which access is to be granted. If applicable, more than one role may be selected per application.

ALC or PAYROLL OFFICE	APPLICATION	ROLE(S)				
		IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	IPAC	IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	TRACS	TRACS Reports	Bulk File User	TRACS System Log		
	RITS	RITS Accountant	RITS Payroll Clerk	RITS Payroll Admin	Bulk File Submitter	RITS System Log
	IPAC	IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	TRACS	TRACS Reports	Bulk File User	TRACS System Log		
	RITS	RITS Accountant	RITS Payroll Clerk	RITS Payroll Admin	Bulk File Submitter	RITS System Log

\_\_\_\_\_  
Name and Title of Supervisor

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Date

### FOR IAA USE ONLY: (Complete this section when you have completed a review of the request)

IAA Name and Signature: \_\_\_\_\_

Date Reviewed: \_\_\_\_\_

<sup>1</sup> Middle initial is required – use 1<sup>st</sup> letter of last name as the middle initial if the user does not have a middle name.

<sup>2</sup> Master ALC – user's primary ALC.

User: Return completed IPAC User Request Form to your IAA.

IAA: Fax completed form to the IPAC Enrollment Department at (202) 874-6170 by July 2, 2001.

## IPAC User Request Form

(Continuation page if additional role designations are required)

Name (First, Middle Initial, Last) \_\_\_\_\_

ALC or PAYROLL OFFICE	APPLICATION	ROLE(S)				
	IPAC	IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	TRACS	TRACS Reports	Bulk File User	TRACS System Log		
	RITS	RITS Accountant	RITS Payroll Clerk	RITS Payroll Admin	Bulk File Submitter	RITS System Log
	IPAC	IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	TRACS	TRACS Reports	Bulk File User	TRACS System Log		
	RITS	RITS Accountant	RITS Payroll Clerk	RITS Payroll Admin	Bulk File Submitter	RITS System Log
	IPAC	IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	TRACS	TRACS Reports	Bulk File User	TRACS System Log		
	RITS	RITS Accountant	RITS Payroll Clerk	RITS Payroll Admin	Bulk File Submitter	RITS System Log
	IPAC	IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	TRACS	TRACS Reports	Bulk File User	TRACS System Log		
	RITS	RITS Accountant	RITS Payroll Clerk	RITS Payroll Admin	Bulk File Submitter	RITS System Log
	IPAC	IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	TRACS	TRACS Reports	Bulk File User	TRACS System Log		
	RITS	RITS Accountant	RITS Payroll Clerk	RITS Payroll Admin	Bulk File Submitter	RITS System Log
	IPAC	IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	TRACS	TRACS Reports	Bulk File User	TRACS System Log		
	RITS	RITS Accountant	RITS Payroll Clerk	RITS Payroll Admin	Bulk File Submitter	RITS System Log
	IPAC	IPAC Reports	IPAC User	IPAC Supervisor	Bulk File Submitter	IPAC System Log
	TRACS	TRACS Reports	Bulk File User	TRACS System Log		
	RITS	RITS Accountant	RITS Payroll Clerk	RITS Payroll Admin	Bulk File Submitter	RITS System Log

User: Return completed IPAC User Request Form to your IAA.

IAA: Fax completed form to the IPAC Enrollment Department at (202) 874-6170 by July 2, 2001.

## IPAC System User Roles and Functions

### IPAC

User Role	Function Performed
IPAC Reports	<ul style="list-style-type: none"> <li>• View system messages</li> <li>• Access to the following reports: <ul style="list-style-type: none"> <li>Agency special requirements</li> <li>Headquarters transactions</li> <li>IPAC and zero dollar transactions</li> <li>IPAC transaction download</li> <li>Parent / child relationships</li> <li>Predecessor / successor ALCs</li> <li>Treasury reporting requirements</li> </ul> </li> <li>• Review reports / data files (future release)</li> <li>• Purge reports / data files</li> </ul>
IPAC User	Same access rights as the IPAC Reports role, plus <ul style="list-style-type: none"> <li>• Process payment, collection, adjustment and zero dollar transactions</li> <li>• Complete incomplete transactions</li> <li>• View status of agency special requirements request</li> </ul>
IPAC Supervisor	Same access rights as the IPAC Reports role, plus <ul style="list-style-type: none"> <li>• Request an update to agency billable status</li> <li>• View agency billable status</li> <li>• Request an update to agency special requirements</li> <li>• View status of agency special requirements request</li> <li>• Request establishment of a parent / child relationship</li> <li>• Update agency information</li> </ul>
Bulk File Submitter	<ul style="list-style-type: none"> <li>• Submit bulk IPAC transactions</li> <li>• View system messages</li> <li>• Access to confirmation / rejection report</li> <li>• Review reports / data files (future release)</li> <li>• Purge reports / data files</li> </ul>
IPAC System Log	<ul style="list-style-type: none"> <li>• View system related processing information</li> </ul>

### TRACS

User Role	Function Performed
TRACS Reports	<ul style="list-style-type: none"> <li>• View system messages</li> <li>• Access to TRACS Reports</li> <li>• Review reports / data files (future release)</li> <li>• Purge reports / data files</li> </ul>
Bulk File User	<ul style="list-style-type: none"> <li>• Pick-up pass-thru files</li> </ul>
TRACS System Log	<ul style="list-style-type: none"> <li>• View system related processing information</li> </ul>

## RITS

User Role	Function Performed
RITS Accountant	<ul style="list-style-type: none"> <li>• View system messages</li> <li>• View list of all health benefit codes</li> <li>• Access to the following reports: <ul style="list-style-type: none"> <li>Computer generated 2812 or 2812A</li> <li>Enrollment codes</li> <li>Holiday schedule</li> </ul> </li> <li>• Review reports / data files (future release)</li> <li>• Purge reports / data files</li> </ul>
RITS Payroll Clerk	Same access rights as the RITS Accountant role, plus <ul style="list-style-type: none"> <li>• Manage 2812</li> </ul>
RITS Payroll Admin	Same access rights as the RITS Accountant role, plus <ul style="list-style-type: none"> <li>• Manage 2812</li> <li>• Maintain payroll office / pay cycle</li> </ul>
Bulk File Submitter	<ul style="list-style-type: none"> <li>• Submit bulk 2812s</li> <li>• View system messages</li> <li>• Access to confirmation / rejection report</li> <li>• Review reports / data files (future release)</li> <li>• Purge reports / data files</li> </ul>
RITS System Log	<ul style="list-style-type: none"> <li>• View system related processing information</li> </ul>